PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

09/6783/8

CLAIMS AS FILED - PART I SMALL ENTITY OTHER										THAN		
			(Column 1)		(Column 2)			TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			8				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TC	TAL CHARGEA	BLE CLAIMS	8 minus 20=		* v			X\$ 9=		OR	X\$18=	
INE	EPENDENT CL	AIMS	/ mir	nus 3 =	*			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	7/0
	C					OTHER	THAN					
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 8	Minus	<u> </u>	0	=		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MI	Minus	*** ENDEN	CLAIM	=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
				<u></u>	TOTAL		OR	TOTAL ADDIT. FEE				
	Λ		DDIT. FEE (<u> </u>)	ADDII. FEEL						
Ė	TA -	(Column 1) CLAIMS		(Colur		(Column 3)	ו ר		4001	1	<u> </u>	4551
AMENDMENT B	in Disi	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 8	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* /	Minus	***	CLAIM]=		X40=		OR	X80=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OB	+270=	
							L			OH		
							Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	· /X	Minus	***2	0 -			X\$-9=		OR-	₹\$18=	
AME	Independent	NTATION OF MI	Minus	*** £	CLAIM	=		X40=		OR	X80=	
											+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
**	If the "Highest Nu	mber Previously Pa	aid For" IN THIS	S SPACE I	s less thar	n 20, enter "20.	." A(DDIT. FEE		OR	TOTAL ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												



rication or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

CLAIMS AS FILED - PART I							SMALL TYPE	OTHER THAN OR SMALL ENTITY				
				Column 1)		(Column 2)			OR			
FOR			NUMBER FILED		NUMBER	NUMBER EXTRA		FEE		RATE	FEE	
BASIC FEE								380.00	OR		760.00	
40	TAL CLAIMS		18	minus	20= *		X\$ 9=		OR	X\$18=		
NDEPENDENT CLAIMS minus 3 = *						X39=		OR	X78=			
JW.	MULTIPLE DEPENDENT CLAIM PRESENT								OR	+260=		
H	If the difference in column 1 is less than zero, enter "0" in column 2								OR	TOTAL		
	CLAIMS AS AMENDED - PART II							SMALL ENTITY			OTHER THAN OR SMALL ENTITY	
2			mn 1)	altamentaria selamentaria de	(Column 2) HIGHEST	(Column 3)	SMALL	ADDI-	1		ADDI-	
MIA		REMA AF	NIMS NINING TER DMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	TIONAL FEE		RATE	TIONAL	
AMENDIMENT	Total	*		Minus	**	=	X\$ 9=		OR	X\$18=		
MEN	Independent	*		Minus	***	=	X39=		OR	X78=		
_	FIRST PRESE	NTATIO	N OF M	ULTIPLE DEF	PENDENT CLAIM		·+130=		OR	+260=		
							TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE		
										ADDII. PEEI		
	 		mn 1)	100000000000000000000000000000000000000	(Column 2) HIGHEST	(Column 3)		ADDI-	1 1		ADDI-	
AMENDMENT B		REMA AF	NINING TER DMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	TIONAL		RATE	TIONAL	
DME	Total	* .		Minus	**	=	X\$ 9=		OR	X\$18=		
MEN	Independent	*		Minus	***	=	X39=		OR	X78=		
7	FIRST PRESE	NTATIO	N OF M	JLTIPLE DEF	PENDENT CLAIM		+130=		OR	+260=		
							TOTAL		OR	TOTAL ADDIT, FEE		
							ADDIT. FEE		•	ADDIT. I EE		
			mn 1)	The same and the same and the	(Column 2) HIGHEST	(Column 3)		1001	1 1		ADDI	
NT C		REMA AF	UMS UNING TER		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT C	Total	*	DMENT	Minus	##	=	X\$ 9=	122	OR	X\$18=		
AEN	Independent	*		Minus	***	=	X39=		OR	X78=		
A		OITATIO	N OF M	JLTIPLE DEF	PENDENT CLAIM				Un			
							+130=		OR	+260=		
•	f the entry in colu	mn 1 is le	ss than th	ne entry in colu	mn 2, write "0" in co	lumn 3. ın 20. enter "20."	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
* If the entry in column 1 is less than the city in column 1 is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
The "Highest Number Previously Paid For" (Total or Independent) is the highest number round in the appropriate box in column ".												